AMENDMENT TRANSMITTAL LETTER (Sm Applicant(s): Eric F. Bernstein				tity)		Docket No. BERN0073US.NP				
Application No.	Filing Date	Examiner		Customer N	۱o.	Group Art Unit	Confirmation No.			
10/541,348	September 26, 2005	Huang, Gigi Georgi		26259		1612	7761			
Invention: Method	d for Treating Ocular	Diseases via Nitroxide a	nd or Pc	olyhydroxy A	vcid	Containing Cor				
COMMISSIONER FOR PATENTS:										
Transmitted herewith is an amendment in the above-identified application.										
Applicant claims small entity status. See 37 CFR 1.27										
The fee has been calculated and is transmitted as shown below.										
		CLAIMS AS AM	IENDED)						
	CLAIMS REMAINING	HIGHEST #	NUMBE	ER EXTRA		RATE	ADDITIONAL			
	AFTER AMENDMENT	PREV. PAID FOR	CLAIMS	S PRESENT			FEE			
TOTAL CLAIMS	10 -	20 =			Х	\$26.00	\$0.00			
Multiple Dependent	t Claims (check if appl	5 =		0	Х	\$110.00	\$0.00			
Multiple Dependent	t Claims (check if appl	licable) TOTAL ADDITIONAL F				NACKIT	\$0.00 \$0.00			
	nal fee is required for a		-EE 1 0.	T I HIO AIVIL	:Nu	MEN!	Ψυ.υυ			
_	nal fee is required for a arge Deposit Account N		n the am	nount of						
☐ A check in t	the amount of	to cover the filing	g fee is e	enclosed.						
		d to charge payment of	the follo	owing fees as	ssoc	ciated with this				
		erpayment to Deposit Ac quired under 37 C.F.R. 1		10.						
		essing fees under 37 C.F.R. 1		,						
Payment by	credit card. Form PT0	O-2038 is attached.								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
16	14 7 ,, []	Sieun Gara III.	n and a :Dated							
J Joshlun M. Jum J Signiture				: November	r 3, 2	2008				
Kathleen A. Tyrrell			I certif	iy that this co	orres	spondence is being	ng deposited with the			
Licată & Tyrrell P. 66 E. Main Street	C		mail in a	an envelope ad	ddres	ssed to "Commission	postage as first class ioner for Patents, P.O.			
Marlton, New Jerse	•		Box 140		VA ∠	22313-1450" [37 CF ·	FR 1.8(a)] on			
Telephone: (856) 810-1515 Facsimile: (856) 810-1454				(Date)		_				
				Signature	of Pe	erson Mailing Corres	espondence			
cc:										
				'vved or Printed'	Nam	se of Person Mailing	Typed or Printed Name of Person Mailing Correspondence			